

**TITLE IV-E INCENTIVE FUNDS
ANNUAL REPORT FOR CY 1999**

_____ County
Department of Human/Social Services

ASSURANCE REGARDING NON-SUPPLANTING AND NOTIFICATION OF UNSPENT FUNDS

I. Assurance

I, the undersigned, as the authorized representative of the county, do hereby assure that this county did not use any Title IV-E Incentive Funds to supplant any other federal, state or local funds previously dedicated to the activities and programs described in this annual report. I further understand that this maintenance of effort is a statutory requirement. (Ref. 46.45(2)(b), Stats.)

II. Notification of Unspent Funds

Please complete the following table:

	Amount of Unspent Funds
1998	
1999	

Please provide a rationale for not spending all of the allocated funds in either or both of the calendar years. Please also specify if any of the funds were intentionally carried over for a specific purpose or reason, and describe that purpose or reason.

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(Signature of authorized agency representative)

Date